Atty. Docket:

Combined Declaration for Patent Application and Power of Attorney

As a below-named inventor, I hereby declare that:	
My residence, post office address and citizenship are as stated below next to my name; and that I believe I am the original, first and joint inventor (if plural names are listed below) or an original, first and joint inventor (if plural names are listed below) the subject matter which is claimed and for which a patent is sought on the invention entitled	irsi) of
METHOD AND DEVICE FOR TREATMENT OF MITRAL INSUFFICIENCY	
the specification of which (check one)	-

		only one name thich is claime DEVICE	d and for	winch a paie	n ongina nt is sou	u, first and the	d joint ir inventio	nventor ((if plur	al name	s are liste	riginal, firs ed below) o
		which (check o				·						
	[] [x]	U.S. Appln. I was/will be international	he Unite No. filed in (PCT)	the U.S. un	der 35 PCT/ ge appli	USC 83	371 hv	entry in	to the		entry re	stage of ar quested or 371/§102(e)
and was ame	nded on	(include date	ofomen	iments under PC	T 4=+ 10	and 21 (CD	(i	if applic	able).			
information k hereby clain inventor's center to the control of the	mown by m foreign rtificate, have al	understand the to above; and we not be made on priority become or prior PCT so identified to	erial to prefits un applicat	nowledge the patentability as ider 35 U.S.C	duty to s defined \$§ 11	disclose l in 37 C.F and 365	to the	Patent a 6. prior fo	and Tr	ademarl	on(s) for	(PTO) all
	(Number	 -	(C	ountry)		(Day Mon						
1	(Number)		(Country)			(Day Month Year Filed)			-	[] YES	[] NO	
hereby claim	the be	nefit under 35	U.S.C	\$120 of any n	nior II S	707 PF01	deional :	onnlie-t	i(-)		DOT	1:

0 of any prior U.S. non-provisional application(s) or prior PCT application(s) designating the U.S. listed below, or under §119(e) of any prior U.S. provisional applications listed below, and, insofar as the subject matter of each of the claims of this application is not disclosed in such U.S. or PCT application in the manner provided by the first paragraph of 35 U.S.C. §112, I acknowledge the duty to disclose to the PTO all information as defined in 37 C.F.R. §1.56(a) which occurred between the filing date of the prior application and the national filing date of this application:

(Application No.)	(Day Month Year Filed)	(Status: patented, pending, abandoned)
(Application No.)	(Day Month Year Filed)	(Status: patented, pending, abandoned)
(Application No.)	(Day Month Year Filed)	(Status: patented, pending, abandoned)

As a named inventor, I hereby appoint the following registered practitioners to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

All of the practitioners associated with Customer Number 001444

Direct all correspondence to the address associated with Customer Number 001444; i.e.,

BROWDY AND NEIMARK, P.L.L.C. 624 Ninth Street, N.W. Washington, D.C. 20001-5303 (202) 628-5197

The undersigned hereby authorizes the U.S. Attorneys or Agents appointed herein to accept and follow instructions from AWAPATENT AB as to any action to be taken in the U.S. Patent and Trademark Office regarding this application without direct communication between the U.S. Attorneys or Agents and the undersigned. In the event of a change of the persons from whom instructions may be taken, the U.S. Attorneys or Agents appointed herein will be so notified by the undersigned.

Page 2 of 2 Pages Title: METHOD AND DEVICE FOR T	ΡΕΔΦΜΈΝΦ ΟΕ ΜΙΦΡΔ ¹	I. TNSHEFT	Atty. Docket:
U.S. Application filed 5/2/2001	Serial No.	L INSUFFI	CIENCI
PCT Application filed	Serial No		
I hereby further declare that all statements made here information and belief are believed to be true; and the statements and the like so made are punishable by fine of false statements may jeopardize the validity of the application.	at these statements were made vor imprisonment, or both, under	vith the knowled 18 U.S.C. §1001	ge that willful fals
FULL NAME OF FIRST INVENTOR	INVENTOR SECTIONATURE		DATE
Jan Otto SOLEM ,	1 / Dellu	1	06/03/01
RESIDENT		CITIZENSHIP	
STETTEN (SH), SWITZERLAND		Norwegia	an
POST OFFICE ADDRESS			-
Wallenruttistrasse 14, CH-82	234 STETTEN (SH)	SWITZER	LAND
FULL NAME OF SECOND JOINT INVENTOR	INVENTOR'S SIGNATURE		DATE
Per Ola KIMBLAD	- how he		06/03/01
RESIDENT	,	CITIZENSHIP	
LUND, SWEDEN ·		Swedish	
POST OFFICE ADDRESS			
Saturnusgatan 9, SE-224 57	LUND, SWEDEN		
FULL NAME OF THIRD JOINT INVENTOR	INVENTOR'S SIGNATURE		DATE
Erwin BERGER	Ornin Der	127	06/03/01
RESIDENT		CITIŽENSHIP	
STETTFURT, SWITZERLAND	/	Swiss	
POST OFFICE ADDRESS			
Trottenackerstrasse 4, CH-95		TTZERLANI	
FULL NAME OF FOURTH FOINT INVENTOR Michael SCHWAGER	INVENTOR'S SIGNATURE	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	DATH PLATE
RESIDENT		CITIZENSHIP	1 /
WINTERTHUR, SWITZERLAND	1	Swiss	
POST OFFICE ADDRESS			
Hegifeldstrasse 9, CH-8404	WINTERTHUR, SWITZ	ERLAND	
full name of fifth joint inventor	INVENTOR'S SIGNATURE		DATE
RESIDENT		CITIZENSHIP	
RESIDENT.	•	CITEDIOI	
POST OFFICE ADDRESS			
FULL NAME OF SIXTH JOINT INVENTOR	INVENTOR'S SIGNATURE		DATE
RESIDENT		CITIZENSHIP	
POST OFFICE ADDRESS		-	
FULL NAME OF SEVENTH JOINT INVENTOR	INVENTOR'S SIGNATURE		DATE
RESIDENT		CITIZENSHIP	
POST OFFICE ADDRESS '			

.......

ALL INVENTORS MUST REVIEW APPLICATION AND DECLARATION BEFORE SIGNING. ALL ALTERATIONS MUST BE INITIALED AND DATED BY ALL INVENTORS PRIOR TO EXECUTION. NO ALTERATIONS CAN BE MADE AFTER THE DECLARATION IS SIGNED. ALL PAGES OF DECLARATION MUST BE SEEN BY ALL INVENTORS.